

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

23439-099-401

CLAIMS AS FILED - PART I

|                                  | (Column 1)   | (Column 2)               |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 12           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 12 minus 20= | 0                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =  | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | 12/6/3/04                        |                                    |               |
| Total   | * 11                             | Minus                              | ** 20 =       |
| Independent   | * 3                              | Minus                              | ** 3 =        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY TYPE |        | OTHER THAN SMALL ENTITY |        |
|-------------------|--------|-------------------------|--------|
| RATE              | Fee    | RATE                    | Fee    |
| BASIC FEE         | 385.00 | OR BASIC FEE            | 770.00 |
| XS 9=             |        | OR XS18=                |        |
| X43=              |        | OR X86=                 |        |
| +145=             |        | OR +290=                |        |
| TOTAL             |        | OR TOTAL                | 770    |

| SMALL ENTITY     |                | OTHER THAN SMALL ENTITY |                |
|------------------|----------------|-------------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                    | ADDITIONAL FEE |
| XS 9=            |                | OR XS18=                |                |
| X43=             |                | OR X86=                 |                |
| +145=            |                | OR +290=                |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE     |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   |                                  |                                    |               |
| Total   | * 11                             | Minus                              | ** =          |
| Independent   | * 3                              | Minus                              | ** =          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE ADDITIONAL FEE |  | RATE ADDITIONAL FEE |  |
|---------------------|--|---------------------|--|
| XS 9=               |  | OR XS18=            |  |
| X43=                |  | OR X86=             |  |
| +145=               |  | OR +290=            |  |
| TOTAL ADDIT. FEE    |  | OR TOTAL ADDIT. FEE |  |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   |                                  |                                    |               |
| Total   | * 11                             | Minus                              | ** =          |
| Ind p ndent   | * 3                              | Minus                              | ** =          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE ADDITIONAL FEE |  | RATE ADDITIONAL FEE |  |
|---------------------|--|---------------------|--|
| X\$ 9=              |  | OR X\$18=           |  |
| X43=                |  | OR X86=             |  |
| +145=               |  | OR +290=            |  |
| TOTAL ADDIT. FEE    |  | OR TOTAL ADDIT. FEE |  |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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